

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> St. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073



IA ETHICS AND  
CAMPAIGN DISCLOSURE BOARD  
FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

2008 MAY 29 PM 12: 54

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Sodders For State Senate

**IMPORTANT:** Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Steve Sodders

Political Party (if applicable)

Democrat

Office Sought  
State Senate

District (if Senate or House)  
22

FORM  
DR-2

(Rev. 07/2007)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

1702

Logged In

2

Scanned

Computer

Audited

4 pages

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Amy White

SIGNATURE OF PERSON FILING REPORT

641-473-2167

TELEPHONE

5/29/08

DATE SIGNED

I AM FILING A May 30, 2008

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 37,283.41

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below)

1,755.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 39,038.41

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

265.13

Schedule F: Loan Repayments total (Attach Schedule F)

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 38,773.28

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 70.00

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

IA ETHICS AND

2008 MAY 29 PM 11

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Sodders For State Senate

Reset Form

**SCHEDULE****A**

(Rev. 07/03)

**MONETARY  
RECEIPTS**☐ CHECK THIS BOX IF  
AMENDING FORM

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 66B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
5/15/08	ID# CK#	Mary Brown 709 Fremont Iowa Falls, IA 50126-2325		\$20.00	<input type="checkbox"/>
5/15/08	ID# CK#	Lee Obrzut 925 Lake Street South Kirkland, WA 98033		\$500.00	<input type="checkbox"/>
5/15/08	ID# CK#	Roberta Conroy 34 Haldeman Road Santa Monica, CA 90402		\$1,000.00	<input type="checkbox"/>
5/18/08	ID# CK#	Sally Kriegel 3331 330th Street Gilman, IA 50106		\$50.00	<input type="checkbox"/>
5/19/08	ID# CK#	Peggy Hannam 2320 Stratford LN Marshalltown, IA 50158-3889		\$50.00	<input type="checkbox"/>
5/20/08	ID# CK#	Marshall County Democratic Central Committee P.O. Box 152 Marshalltown, IA 50158		\$35.00	<input checked="" type="checkbox"/>
5/20/08	ID# CK#	Elizabeth Barnes 1529 236th St. State Center, IA 50247		\$25.00	<input type="checkbox"/>
5/20/08	ID# CK#	Jessica Miller 205 N. 22nd St. Marshalltown, IA 50158		\$25.00	<input type="checkbox"/>
5/21/08	ID# CK#	Evalyn Mathews 713 E. Maple St. Hubbard, IA 50122		\$ 25.00	<input type="checkbox"/>
5/28/08	ID# CK#	Frezman Ohrt 1640 180th St. Clemens, IA 50051-9621		\$ 25.00	<input type="checkbox"/>

SUB-TOTAL

\$ 1,755.<sup>00</sup>

TOTAL (If last page of this schedule)

\$ 1,755.<sup>00</sup>

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Sodders for State Senate

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/15/08	ID# CK#	Auburn Quad, Inc. P.O. Box 390728 Cambridge, MA 02139	Credit Card Processing fee	\$59. <sup>25</sup>
5/19/08	ID# CK# 1027	Steve Sodders P.O. Box 723 State Center, IA 50247	Office Supplies & room rent	\$132. <sup>75</sup>
5/19/08	ID# CK# 1028	Kellee Mullens 2510 S 6 <sup>th</sup> St. Apt. C-23 Marshalltown, IA 50158	Office Supplies	\$19. <sup>13</sup>
5/19/08	ID# CK# 1029	Kellee Mullens 2510 S 6 <sup>th</sup> St. Apt. C-23 Marshalltown, IA 50158	Stamps	\$54. <sup>00</sup>
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$265. <sup>13</sup>
TOTAL (if last page of this schedule)				\$265. <sup>13</sup>

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(I).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Sodders for State Senate

Reset Form

SCHEDULE <b>E</b> (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
5/15/08	Kim Smith 205 N Center St. Marshalltown, IA 50158		Invitations	\$ 35. <sup>00</sup>	<input checked="" type="checkbox"/>
5/22/08	Kim Smith 205 N Center St. Marshalltown, IA 50158		Invitations	\$ 35. <sup>00</sup>	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 70.<sup>00</sup>TOTAL (if last  
page of this  
schedule) \$ 70.<sup>00</sup>

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)